Case 16-08685 Doc 1 Fill in this information to identify your case:		Entered 03/14/16 14:10:53 age 1 of 65	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Linda First name	First name
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport	Middle name Carter Last name	Middle name Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
	maidernames.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- <u>5679</u>	XXX - XX-
	Security number or federal Individual Taxpayer	OR 9 xx - xx-	OR 9 xx - xx-
	Identification number (ITIN)		

Linda Case 16-08685 Doc 1 Filed 03/14/16 Entered @3/14/16/14/10:53 Desc Main Debtor 1 Page 2 of 65 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 1248 Raymond Number Street Number Street South Elgin Illinois 60177 Zip Code City State City State Zip Code Kane County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. PO Box 1231 Number Street Number Street 60123 Elgin Illinois City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Linda Case 16-08685 Doc 1 Filed 03/21/4/16 Entered 03/21/4/16 (14-4-11-0:53 Desc Main

Document Document Page 3 of 65 Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

Linda Case 16-08685 Doc 1 Filed 03/24/16 Entered 03/14/16/14/10:53 Desc Main Debtor 1 Page 4 of 65 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent

repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

You must check one:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

✓	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	Attach a copy of the certificate and the payment plan, if any,

that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

la	I am not required to receive a briefing about credi					
CO	ounseling beca	use of:				
	Incapacity.	I have a mental illness or a mental				

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the

internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 65 Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. True ? additionalDetails.OtherTypesOfDebt : "" 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ☐ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **✓** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50-99 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion **|√|** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$100,001-\$500,000 \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X /s/ Linda Carter Signature of Debtor 1 Signature of Debtor 2 3/14/2016 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

Filed 03/44/16 Entered 03/44/16 (144)10:53 Desc Main

Doc 1

Linda Case 16-08685

Debtor 1

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date 3/14/2010 MM / DD / Y	
State		Zip Code
	Email address	imoskovits@semradlaw.co
	Illinois	
	State	MM / DD / Y State Email address

<u>Doc 1 Filed 03/14/16 Entered 03/1</u>4/16 14:10:53 Desc Main Fill in this information to identify your case: Debtor 1 Linda Carter First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$2,601.00 1b. Copy line 62, Total personal property, from Schedule A/B \$2,601.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$5,236.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$10.919.64 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$16,155.64 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I)

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,726.00

Debtor 1 Linda Case 16-08685 Doc 1 Filed 03tar4/16 Entered 03tar4/16 (AcAira) 0:53 Desc Main

Page 9 of 65 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$565.14 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

	Case 16-08685		Filed 03/14/16	Entered 03/14/1	6 14:10:53	Desc Main
Fill in this	information to identify your case:	:		<u> </u>		
Debtor 1	Linda		Carte	r		
	First Name	Middle	Name Last N			
Debtor 2						
(Spouse,	if filing) First Name	Middle	Name Last N	ame		
United St	ates Bankruptcy Court for the:	Northern	District of III			
Case nun	nber		(3	State)		
. ,	al Form 106A/B					Check if this is an amended filing
	dule A/B: Prope	rtv				arrierided illing 12/1
n each ca ategory v	ntegory, separately list and des where you think it fits best. Be ble for supplying correct inform name and case number (if kno	cribe items. List as complete an nation. If more	id accurate as possible. I space is needed, attach	f two married people are fi	iling together, botl	h are equally
Part 1:	Describe Each Residence	e, Building,	Land, or Other Rea	Estate You Own or I	lave an Intere	st In
	u own or have any legal or equ	itable interest i	n any residence, building	, land, or similar property?	?	
<u>~</u>	No. Go to Part 2					
	Yes. Where is the property?					
			What is the property			secured claims or exemptions. Put ny secured claims on Schedule D:
1.1	Street address if available or other description	Single-family home			Have Claims Secured by Property.	
			Duplex or multi-uni	•	Current value	of the Current value of the
			Condominium or co	•	entire property	
			Land	Julie Horne		-
	Number Street		Investment property	,	Describe the n	ature of your ownership
			Timeshare		interest (such	as fee simple, tenancy by
	City State	Zip Code	Other		tne entireties,	or a life estate), if known.
			ш 			
			Debtor 1 only	in the property? Check one	Check if the control c	nis is community property uctions)
						,
			Debtor 2 only Debtor 1 and Debto	or 2 only		
				lebtors and another		
			_	u wish to add about this it	em, such as local	
If you	own or have more than one, list he	ere.	property identification	ii iidiiibei.		
,	, , , , , , , , , , , , , , , , , , , ,		What is the property	? Check all that apply.	Do not deduct s	ecured claims or exemptions. Put
1.2			Single-family home			ny secured claims on Schedule D:
	Street address, if available, or o	ther description	Duplex or multi-uni	t building	Creditors virio	Have Claims Secured by Property.
			_ Condominium or co	operative	Current value	
			Manufactured or m	obile home	entire property	y? portion you own?
			Land			
	Number Street		Investment property		Describe the n	ature of your ownership as fee simple, tenancy by
			Timeshare			or a life estate), if known.
	City State	Zip Code	Other			
			Who has an interest	in the property? Check one	Check if the	nis is community property
			Debtor 1 only	in the property i eneak one	(see instru	
			Debtor 2 only		_	
			Debtor 1 and Debtor	or 2 only		
			At least one of the o	•		
			_	u wish to add about this it	em such as local	
			property identification	n number:	em, such as local	

Debtor 1	Linda Case 16-086	B5 Doc 1 F	Filed 03614/16 Entered 03/14/16	(ilk4iv10: <u>53 De</u>	esc Main
1.3Stre	eet address, if available, or oth	wi	Documes hat me Page 11 of 65 hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. e Current value of the portion you own?
Nur	nber Street State	Zip Code	Land Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
		Ct Ot	ho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about this item, soperty identification number:	(see instruction	community property s)
you ha		e that number here	of your entries from Part 1, including any entries fo		
Do you ov you own th 3. Cars, va	wn, lease, or have legal or e lat someone else drives. If you ans, trucks, tractors, sport utilit	quitable interest in a lease a vehicle, also re	iny vehicles, whether they are registered or not? Inceport it on Schedule G: Executory Contracts and Unexpess		
	Make Model: Year: Approximate mileage: Other information:	Cadillac CTS 2009 133000	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. e Current value of the portion you own? \$1601.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. e Current value of the portion you own?

Debtor 1	Linda Case 16-08685 Doc 1	Filed 03/1/4/16 Entered 03/1/4/16	6/4k4k40: <u>53 Des</u>	c Main
	First Name Middle Name	Document Page 12 of 65	5	
3.3	MakeModel:	Who has an interest in the property? Check one.	Do not deduct secured cl the amount of any secure	•
	Year:	Debtor 1 only	•	nims Secured by Property.
	Approximate mileage:		Croanoro vino riavo cia	and decared by Property.
	·· <u> </u>	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see		
		instructions)		
3.4	Make	Who has an interest in the property? Check	Do not deduct secured cl	•
	Model:	one.	the amount of any secure	
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see		
		instructions)		
	No Yes			
4.1	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put
	Model:	one.	the amount of any secured claims on Schedule D:	
	Year:	Debtor 1 only	Creditors Who Have Cla	nims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see		
		instructions)		
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put
	Model:	one.		ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cla	nims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
		l of your entries from Part 2, including any entries f	910	601.00
you na	ve attached for Fart 2. Write that Humber Here	-		

Debtor 1 Linda Case 16-08685 First Name Doc 1 Filed 03614/16 Entered 03/14/16/14/10:53 Desc Main Document Page 13 of 65

Do you own or h	ave any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household good	g .	
→	oliances, furniture, linens, china, kitchenware	
No		
Yes. Describe	shoes, clothes, some furniture, pots and pans	\$300.00
•	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music s; electronic devices including cell phones, cameras, media players, games	
✓ No		
Yes. Describe		
	lue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; bin, or baseball card collections; other collections, memorabilia, collectibles	
✓ No		
Yes. Describe		
	orts and hobbies notographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments	
✓ No		
7		
Yes. Describe		
10. Firearms Examples: Pistols, ri	les, shotguns, ammunition, and related equipment	
10. Firearms Examples: Pistols, ri ✓ No Yes. Describe 11. Clothes Examples: Everyday	les, shotguns, ammunition, and related equipment clothes, furs, leather coats, designer wear, shoes, accessories	
 10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No 	clothes, furs, leather coats, designer wear, shoes, accessories	
10. Firearms Examples: Pistols, ri ✓ No Yes. Describe 11. Clothes Examples: Everyday		\$300.00
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe	clothes, furs, leather coats, designer wear, shoes, accessories clothing dewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	\$300.00
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday	clothes, furs, leather coats, designer wear, shoes, accessories clothing dewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	\$300.00
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv	clothes, furs, leather coats, designer wear, shoes, accessories clothing dewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	\$300.00
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No	clothes, furs, leather coats, designer wear, shoes, accessories clothing dewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er rings	
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca	clothes, furs, leather coats, designer wear, shoes, accessories clothing dewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er rings	
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca	clothes, furs, leather coats, designer wear, shoes, accessories clothing dewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er rings	
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca	clothes, furs, leather coats, designer wear, shoes, accessories clothing dewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er rings	
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca	clothes, furs, leather coats, designer wear, shoes, accessories clothing ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er rings is is, birds, horses	
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca No Yes. Describe 14. Any other perso	clothes, furs, leather coats, designer wear, shoes, accessories clothing ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er rings is is, birds, horses	
10. Firearms Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca No Yes. Describe 14. Any other perso No Yes. Describe	clothes, furs, leather coats, designer wear, shoes, accessories clothing ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er rings is is, birds, horses	

Debtor 1 Linda Case 16-08685 Doc 1 Filed 03614/16 Entered 03/414/16 (Au4):10:53 Desc Main
First Name Document Page 14 of 65

Describe Your Financial Assets

Do	you own or have ar	ny legal or equitable inte	rest in any of the following	g?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	in your wallet, in your home, in a sa	afe deposit box, and on hand when yo	ou file your petition Cash:	
17.			certificates of deposit; shares in crecints with the same institution, list each		
	✓ Yes		institution name.		
		17.1. Checking account:	Chase		\$200.00
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		or publicly traded stocks vestment accounts with brokerage	firms, money market accounts		
	✓ No ☐ Yes	Institution or issuer name:			
19.	an LLC, partnership, a		ed and unincorporated business	es, including an interest in	-
	✓ No Yes. Give specific information about them	Name of entity		% of ownership:	

Deb	tor 1 Linda Case It		Filed U3¢ar4/16	Eutered_企到可快收的	(italk#4wd).U. <u>53</u>	Desc Main
	First Name	Middle Name		Page 15 of 65		
20.		orate bonds and other negonal checks, cashio				
		nts are those you cannot trans				
	✓ No	,	, , ,	,		
	Yes. Give specific					
	information about	Issuer name:				
	them					
21	Retirement or pension	accounts				
21.			3(b), thrift savings accoun	ts, or other pension or profit-sl	haring plans	
	✓ No					
	Yes. List each	Type of account:	Institution name:			
	account separately.	401(k) or similar plan:				
		Pension plan:				
		IRA:				
		Retirement account:				
		Keogh:				
		Additional account:				
		Additional account:				
22.	Security deposits and p	prepayments				
		leposits you have made so that				
	companies, or others	vith landlords, prepaid rent, pu	ublic utilities (electric, gas,	water), telecommunications		
	✓ No					
	Yes		Institution name:			
	_	Electric:				
		Gas:				
		Heating oil:				
		Security deposit on rental un	nit:			-
		Prepaid rent:				
		Telephone:				·
		Water:				·
		Rented furniture:				
		Other:				
23.	Annuities (A contract for	a periodic payment of money	to you, either for life or for	a number of years)		
	✓ No	·		•		
	Yes	Issuer name and description	:			

Debt	or 1	Linda First Na	Cas	se 16	6-08685	Doc 1 Middle Name		03¢1/4/16 um ^{æt} nt ^{me}			6 (144:410: <u>53</u>	Desc Main	
24.					i on IRA, in a 529A(b), and		a qualified	ABLE progra	m, or unde	r a qualified sta	ate tuition program.		
		No Yes	In	stitutio	n name and o	description. Sep	arately file t	he records of a	ny interests	11 U.S.C. § 521	(c):		
25.		sts, ec rcisab	-			sts in property	(other than	n anything lis	ted in line), and rights or	r powers	-	
			escrib)	e									
26.	Еха	<i>mples:</i> No		et doma		trade secrets, ebsites, procee				ents			
27.		<i>mples:</i> No		ng perr		eneral intangit e licenses, coop		ociation holdin	gs, liquor lid	enses, professio	onal licenses		
Mor	ney (or pr	opert	y ow	ed to you	?						Current value of portion you own Do not deduct secured claims or exemptions.	?
28.	_	refund	s owe	d to yo	ou								
		Yes. Gi a yı	bout th	em, ind ady file	formation cluding wheth ed the returns ars						Federal: State: Local:		
29.		n ily sup mples: F		ie or lu	mp sum alimo	ony, spousal sur	pport, child s	support, mainte	nance, divo	ce settlement, pr	roperty settlement		
	Ħ	No Yes. Gi	ve spe	ecific in	formation						Alimony:		
											Maintenance:		
											Support: Divorce settlement		
											Property settlemen		
30.		nples: l	Jnpaid	wages	-				pay, vacatio	n pay, workers' co	ompensation,		
		No Yes. Do	escribe	e									

Debt	or 1	Linda Case 16 First Name	6-08685	Doc 1 Middle Name	Filed 03/1/4/16 Documernt	<u>Entered</u> @3/41/4/6 Page 17 of 65	166/1144410: <u>53 D</u>	esc Main
31.		rests in insurance mples: Health, disabi		ance; health	savings account (HSA); cr	· ·	's insurance	
		No Yes. Name the insur of each policy and lis	, ,		Company name:		Beneficiary:	Surrender or refund value:
32.	If you		of a living trust		meone who has died ceeds from a life insurance p	policy, or are currently entitle	d to receive	
33.					n have filed a lawsuit or made claims, or rights to sue	ade a demand for paymer	nt	
		No Yes. Describe	Active Workers	Comp case.	15 WC 035930			
34.		er contingent and et off claims	unliquidated (claims of ev	very nature, including co	unterclaims of the debtor	and rights	
		No Yes. Describe						
35.	✓	financial assets you No Yes. Describe	ou did not alrea	ady list				
36.			-		Part 4, including any entri			\$200.00
Part	5:	Describe Any E	Business-Re	elated Pro	perty You Own or Ha	ave an Interest In. Lis	st any real estate ir	n Part 1.
37.	Do y	ou own or have ar	ny legal or equ	itable intere	est in any business-relate	d property?		
		No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	✓	ounts receivable or	commissions	s you alread	y earned			
39.	Offic	Yes. Describe ce equipment, furn noles: Business-rela			odems, printers, copiers, fa	x machines, rugs, telephone	s. desks. chairs. electroni	c devices
	_	No Yes. Describe	2 2 2 3 3 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		, [-,	

Deb	tor 1 Linda Case It	<u> 3-08085 DOCI FIIEU OSPARAYIO EIILEIEU</u> WARELAYINDOO (ILKAWADO).	DESCIVIAITI
40.	First Name Machinery, fixtures, equ	Middle Name Documet Name Page 18 of 65 uipment, supplies you use in business, and tools of your trade	
	✓ No		
	Yes. Describe		
41.	Inventory		
	✓ No		
	Yes. Describe		
42.	Interests in partnershi	ps or joint ventures	
	✓ No	Name of outity	:
	Yes. Give specific	Name of entity: % of ownersh	ip.
	information about them	·	
40.4	Sustanta lista mailing	lists, or other compilations	
43. (_	iists, or other compliations	
	✓ No		
		clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	No No		
	Yes. Descri	ibe	
44.	Any business-related p	property you did not already list	
	✓ No		
	Yes. Give specific		
	information		
		Il of your entries from Part 5, including any entries for pages you have attached	
or P	art 5. Write that number	here	
Part		Farm- and Commercial Fishing-Related Property You Own or Have an Intensity in farmland, list it in Part 1.	erest In.
46.	Do you own or have ar	ny legal or equitable interest in any farm- or commercial fishing-related property?	
	No. Go to Part 7.		Current value of the portion you own?
	Yes. Go to line 47.		Do not deduct secured
			claims or exemptions
47.	Farm animals Examples: Livestock, pou	ultry, farm-raised fish	
	✓ No		
	Yes. Describe		

Deb	tor 1 Linda Case 16-08685 First Name			Entered @3/414/116/114/110:53 Page 19 of 65	Desc Main	_
48.	Crops-either growing or harvested		Junion	1 age 19 01 03		
	✓ No					
	Yes. Describe					_
49.	Farm and fishing equipment, imple	ments, machinery, fixt	ures, and tools	of trade		
	✓ No					
	Yes. Describe					
50.	Farm and fishing supplies, chemica	als, and feed				
	✓ No					
	Yes. Describe					
51.	Any farm- and commercial fishing-r	elated property you di	d not already lis	st		
0	Examples: Livestock, poultry, farm-raise			•		
	✓ No					
	Yes. Describe					_
E2 A	dd the dollar value of all of your entr	ion from Bart & includ	ing ony ontrino	for pages you have attached		_
	art 6. Write that number here					
					<u> </u>	
	7: Describe All Property You Do you have other property of any k			nat You Did Not List Above		
53.	Examples: Season tickets, country club		iy iist?			
	✓ No					
	Yes. Give specific					
	information					
54. A	dd the dollar value of all of your entri	ies from Part 7. Write t	hat number her	e	•	-
					L	
Part	8: List the Totals of Each Pa	rt of this Form				1
55. F	Part 1: Total real estate, line 2			>		
56. p	part 2 total vehicles, line 5		\$1601.00			_
57. P	art 3: Total personal and household	items, line 15	\$800.00			
58. P	art 4: Total financial assets, line 36		\$200.00			
59. F	Part 5: Total business-related proper	ty, line 45	<u> </u>			
60. F	Part 6: Total farm- and fishing-related	d property, line 52				
61. F	Part 7: Total other property not listed	, line 54				
62. 7	Fotal personal property. Add lines 56 tl	hrough 61	\$2601.00		+ \$2601.00	
				Copy personal property		_
					\$2601.00	_
63. T	otal of all property on Schedule A/B.	Add line 55 + line 62				

Eill	in this inform	Case 16-08685 ation to identify your case:	Doc 1	Filed 03	8/14/16	Entered ()3/1 <mark>.4/16 14</mark> :	10:53	Desc Main
	otor 1	Linda			Carte	er			
20.	0.01	First Name	Mic	ddle Name		Name	_		
	otor 2 ouse, if filing	First Name	Mic	ddle Name	Lasti	Name	_		
Uni	ted States Ba	ankruptcy Court for the:	Northern		District of I		_		
	se number				((State)	_		
Of	ficial F	orm 106C							Check if this is a amended filing
Sc	hedul	e C: The Prop	erty Y	ou Clain	n as E	xempt			12/1
info clain the For is to exe reco exe pro	rmation. Um as exem top of any each item o state a supted up eive certamption of perty is dutil: Ident Which set	sing the property you not. If more space is readditional pages, writh of property you classectific dollar amount to the amount of artin benefits, and tax-	I listed on needed, fi te your na aim as ex nt as exerny applicate exempt received that amount of that amount of the aiming? Collin as claiming? Collinonbankrupons. 11 U.S.C.	Schedule A/E II out and atta me and case empt, you me mpt. Alternati able statutory etirement fun der a law tha ount, your ex Exempt heck one only, ev stcy exemptions. 1 C. § 522(b)(2)	3: Property Ich to this Inumber (i Inust specifively, you Inust Sinds—may Inust Itemption Inust Inust Sinds—may Itemption Inust Inust Sinds—may Itemption Inust Sinds—si	y (Official Form page as many f known). If y the amount may claim thome exemption would be limed to be seen to be seen that the exemption would be limed to be seen	t of the exemple full fair many on the full fair many ons—such as do in dollar among to a particulation to a particulation to the appropriate of t	our source t 2: Addition otion you rket value those for ount. How ar dollar a	sible for supplying correct e, list the property that you onal Page as necessary. On claim. One way of doing so e of the property being health aids, rights to ever, if you claim an amount and the value of the tatutory amount.
		ription of the property a le A/B that lists this pro	perty the ow Co	portion you		t of the exemptic	-	Spec	ific laws that allow exemption
	Brief								735 ILCS 5/12-1001(c)
	description	Cadillac , CTS		\$1,601.00					()
	Line from Schedule A	VB: <u>03</u>				% of fair market va licable statutory lir			
	Brief description	Active Workers Co	•	none					820 ILCS 305/21
	Line from Schedule A	√B: 33				% of fair market va			
3.	(Subject to	aiming a homestead exer adjustment on 4/01/16 and id you acquire the property	every 3 year	rs after that for cas	ses filed on d		,		

Debtor 1 Linda Case 16-08685 First Name Doc 1 Filed 03/14/16 Entered 03/14/16 (1.4:10:53 Desc Main Documenter Page 21 of 65

rt 2: Addition	nal Page			
•	ion of the property and line A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Line from Schedule A/B:	<u>Chase</u> 17	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	cash on hand	\$0.00	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	rings	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	clothing 11	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Brief description: Line from Schedule A/B:	shoes, clothes, some furniture, pots and pans	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

		Case 16-08685	Doc 1 Filed (03/14/16 Entered 03/14	/16 1 / 1·10·E2	Doco Main	
Fill in th	nis informa	ation to identify your case:	TAIL FIELL	7.3/14/10 FINEIEU 0.3/1,4/	10 14.10.55	Desc Main	
Debtor	1	Linda		Carter			
Debtor	2	First Name	Middle Name	Last Name			
		First Name	Middle Name	Last Name			
United	States Ba	nkruptcy Court for the: <u>N</u>	Northern	District of Illinois			
Case no				(State)			
Offic	cial F	orm 106D					eck if this is a
		·	rs Who Hav	e Claims Secured	by Prope		12/1:
correc form. (t inforr On the pany cre	mation. If more space top of any additional ditors have claims secure	e is needed, copy t I pages, write your d by your property?	ried people are filing together he Additional Page, fill it out, in name and case number (if known rother schedules. You have nothing else	number the entri		
Part 1:	Yes. Fi	ll in all of the information bel		, and the second	,		
cla	im. If moi		articular claim, list the other	claim, list the creditor separately for each er creditors in Part 2. As much as ditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	RYKER A		— Describe the propert	y that secures the claim:	\$5,236.00	\$3,202.00	\$2,034.00
		SINS STE H	Cadillac , CTS Value				
	Number	Street		e, the claim is: Check all that apply.			
Gil	lberts	Illinois 60136	Contingent				
	City	State ZIP Code	Unliquidated				
W	7	the debt? Check one.	Disputed				
<u> </u>	Debtor	•	Nature of lien. Check	all that apply.			
<u> </u>	Debtor :	∠ only 1 and Debtor 2 only	An agreement you car loan)	made (such as mortgage or secured			
✓		one of the debtors and		h as tax lien, mechanic's lien)			
	another	if this claim relates to a	Judgment lien fror	n a lawsuit			
∟ Da	ື commເ	unity debt vas incurred 12/1/2014	Other (including a	right to offset)			
50			Last 4 digits of acco	unt number 2214			
		Add the dollar value of vo	ur entries in Column A	on this page. Write that number	\$5,236,00		

here:

		Case 16-0868	5 Doc 1 Filed	103/14/16	Entered 03	<u>/</u> 14/16 14:10:53	Desc	Main	
Fill in	this informa	ation to identify your case	:	· · · · · · · · · · · · · · · · · · ·					
Debt	or 1	Linda		Carte					
Debt	or 0	First Name	Middle Name	Last N	lame				
		First Name	Middle Name	Last N	lame				
Unite	ed States Ba	nkruptcy Court for the:	Northern	District of III					
Case (If kno	number			(;	State)				
`	,	orm 106E/F					Che	ck if this is an	amended filing
			ditors Who	Have U	nsecure	d Claims			12/15
106Å/ are lis the bo	B) and on S sted in Sche exes on the	Schedule G: Executory edule D: Creditors Who eleft. Attach the Contin	Contracts and Unexpire Hold Claims Secured	ed Leases (Offici by Property. If mo e. On the top of	al Form 106G). Do ore space is need	ry contracts on Schedul not include any creditored, copy the Part you ne ges, write your name and	rs with parti ed, fill it ou	ally secured t, number the	l claims that e entries in
1.	_ `	ditors have priority unso to Part 2.	secured claims against y	ou?					
	identify wha possible, lis Part 1. If mo	t type of claim it is. If a cla t the claims in alphabetic ore than one creditor hold	aim has both priority and n	onpriority amounts reditor's name. If y le other creditors i	i, list that claim here you have more than n Part 3.	n, list the creditor separate and show both priority and two priority unsecured cla	Í nonpriority a	amounts. As r	much as
							Total claim	Priority amount	Nonpriority amount

Doc 1 Filed 03614/16 Entered 03/14/16 (144)10:53 Desc Main Linda Case 16-08685 Debtor 1 Documernt Page 24 of 65 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 ARS \$604.00 Last 4 digits of account number Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200 When was the debt incurred? 1/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **FORT** Florida 33313 Unliquidated LAUDERDAL State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 COMMONWEALTH FINANCIAL \$574.00 64N1 Last 4 digits of account number Nonpriority Creditor's Name 245 MAIN ST When was the debt incurred? 11/1/2013 Street Number As of the date you file, the claim is: Check all that apply. Contingent DICKSON CITY 18519 Pennsylvania Unliquidated State City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Is the claim subject to offset? **V** No Yes 4.3 Corporate Collections Department \$1.215.82 Last 4 digits of account number Nonpriority Creditor's Name 1901 Gateway Drive Suite 200 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Irving Texas 75038 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt

✓ No Yes

Is the claim subject to offset?

Other. Specify

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First Name Middle Name Document Page 25 of 65

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.4	CREDIT MANAGEMENT LP	Last 4 digits of account number 9401	\$269.00
	Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY	When was the debt incurred? 8/1/2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	CARROLLTON Texas 75007	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	No		
	Yes		
4.5	CREDTRS COLL	Leat 4 digita of account number 2000	\$727.00
	Nonpriority Creditor's Name POB 63 151 N SCHUYLER AVE	Last 4 digits of account number 8068	
	Number Street	When was the debt incurred? 5/1/2013	
		As of the date you file, the claim is: Check all that apply.	
	KANKAKEE Illinois 60901	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	Check if this claim relates to a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	No	• Strict. Specify	
	Yes		
46	CREDTRS COLL		\$574.00
- 1.0	Nonpriority Creditor's Name	Last 4 digits of account number5950	φ374.00
	POB 63 151 N SCHUYLER AVE Number Street	When was the debt incurred? 8/1/2009	
		As of the date you file, the claim is: Check all that apply.	
	KANKAKEE Illinois 60901	Contingent	
	KANKAKEE Illinois 60901 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another		
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No ☐ Yes		

Debtor 1 Linda Case 16-08685 Doc 1 Filed 03/21/4/16 Entered 03/21/4/16 (14-4):10:53 Desc Main
First Name Middle Name Document Page 26 of 65

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning v	vith 4.5, followed by 4.6, and so forth.	Total claim
4.7	ENHANCED RECOVERY CO L	Lead A Police of a count womber 2000	\$75.00
	Nonpriority Creditor's Name	Last 4 digits of account number 3019	Ψ. σ.σσ
	8014 BAYBERRY RD	When was the debt incurred? 10/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	JACKSONVILLE Florida 32256	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	<u></u>	
	Debtor 1 and Debtor 2 only	Student loans	
	<u></u>	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No	_	
	Yes		
	_		
4.8	iSpeedy Loan Nonpriority Creditor's Name	Last 4 digits of account number	\$2,029.82
	2850 Belvidere Rd	When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Westerness Winein COOF	Contingent	
	Waukegan Illinois 60085 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	No No		
	Yes		
4.9	L J ROSS ASSOCIATES IN Nonpriority Creditor's Name	Last 4 digits of account number 9643	\$121.00
	4 UNIVERSAL WAY	When was the debt incurred? 12/1/2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	IACKCON Miskings 40000	Contingent	
	JACKSONMichigan49202CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	- ·	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	<u> </u>	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No		
	□ Ves		

Filed 03/14/16 Entered 03/14/16 14/10:53 Desc Main Documenter Page 27 of 65 ims - Continuation Page Debtor 1 Linda Case 16-08685 First Name

Doc 1

. α. ι	4 Tour NONF KIOKITT Offsecured Claims - Continu		
	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4 10	NCC BUSINESS SVCS INC		\$571.00
1.10	Nonpriority Creditor's Name	Last 4 digits of account number 2791	ψ071.00
	9428 BAYMEADOWS RD STE 2	When was the debt incurred?10/1/2015	
	Number Street	As of the determined by the state of the chall that and	
		As of the date you file, the claim is: Check all that apply.	
	JACKSONVILLE Florida 32256	Contingent	
	JACKSONVILLE Florida 32256 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	-	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No	<u></u>	
	Yes		
4.11	STANISCCONTR	Last 4 digits of account number 14N1	\$234.00
-	Nonpriority Creditor's Name	Last 4 digits of account number 14N1	
	914 14TH ST POB 480	When was the debt incurred? 10/1/2013	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	MODESTO California 95353	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	- ·	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	'	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No	_	
	= .		
	Yes		
4.12	STATE COLLECTION SERVI	Last 4 digits of account number 5034	\$2,327.00
	Nonpriority Creditor's Name 2509 S STOUGHTON RD	<u>———</u>	
	Number Street	When was the debt incurred? 5/1/2015	
	Training Officer	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MADISON Wisconsin 53716		
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No		
	Yes		

Debtor 1 Linda Case 16-08685 Doc 1 Filed 036144/16 Entered 03/4144/16 (14.44)10:53 Desc Main
First Name Middle Name Document Page 28 of 65

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any enti	ries on this page, nu	mber them beginnin	ng with 4.5, followed by 4.6, and so forth.	Total claim
STATE COLLECTION SERVI Nonpriority Creditor's Name 2509 S STOUGHTON RD Number Street			Last 4 digits of account number 5499 When was the debt incurred? 5/1/2015 As of the date you file, the claim is: Check all that apply.	\$1,598.00
=	otor 2 only e debtors and another im relates to a comm	53716 Zip Code nunity debt	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	

Debtor 1 Linda Case 16-08685 Doc 1 Filed 03614/16 Entered 03/414/16 (Ak4vil 0:53 Desc Main First Name Documentum Page 29 of 65 Part 4: Add the Amounts for Each Type of Unsecured Claim

	Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only 28 U.S.C. §159. Add the amounts for each type of unsecured claim.									
				Total claims						
Total claims from Part 1	6a.	Domestic support obligations.	6a.	\$0.00						
	6b.	Taxes and certain other debts you owe the	6b.	\$0.00						
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00						
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00						
	6e.	Total. Add lines 6a through 6d.	6e.	\$0.00						
				Total claims						
Total claims from Part 2	6f.	Student loans	6f.	\$0.00						
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00						
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00						
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$10,919.64						
	6j.	Total. Add lines 6f through 6i.	6j.	\$10,919.64						

					_
Fill in this inform	Case 16-0868 nation to identify your case		R/14/16 Entered	03/14/16 14:10:53	Desc Main
Debtor 1	Linda		Carter		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	Northern	District of Illinois		
	,		(State)		
Case number (If known)					
,	Form 106G				Check if this is a amended filing
Schedul	e G: Execut	ory Contracts a	and Unexpired	d Leases	12/1
	d, copy the additional p				ing correct information. If more onal pages, write your name and
1. Do you ha	ave any executory	contracts or unexpired	leases?		
No. Che	eck this box and file this fo	rm with the court with your other	schedules. You have nothing	g else to report on this form.	
Yes. Fill	in all of the information be	elow even if the contracts or lea	ses are listed on <i>Schedule</i> A	/B: Property (Official Form 106A	/B).
				state what each contract or lea amples of executory contracts an	
Person	or company with whor	m you have the contract or le	ase	State what the contract	t or lease is for
2.1 <u>Titan Self</u>	f Storage			Residential Lease, Debtor is Lessee,	
INCITIC				lease on a storage unit	

939 S McLean Blvd, Number

Elgin City Street

Illinois State 60123 Zip Code

		Case 16-0868!		03/14/16 Entered	<u>03/1</u> 4/16 14:10:53	Desc Main
Fill in t	his informa	ation to identify your case	ei:			
Debtor	r 1	Linda		Carter		
		First Name	Middle Name	Last Name		
Debtor						
(Spous	se, if filing)	First Name	Middle Name	Last Name		
United	States Ba	nkruptcy Court for the:	Northern	District of Illinois (State)		
Case r	number					
`		orm 106H				Check if this is an amended filing
Sch	edule	H: Your Co	debtors			12/15
ogethen	er, both a	re equally responsible	for supplying correct info	rmation. If more space is nee	eded, copy the Additional Pag	If two married people are filing e, fill it out, and number the entries ase number (if known). Answer
1.	Do you h ☐ No ✓ Yes	ave any codebtors? (If	you are filing a joint case, do	not list either spouse as a cod	ebtor.)	
	Idaho, Lou No.	uisiana, Nevada, New Me Go to line 3.	u lived in a community pro exico, Puerto Rico, Texas, Wa spouse, or legal equivalent li	ashington, and Wisconsin.)	mmunity property states and terri	tories include Arizona, California,
		Yes. In which community	state or territory did you live	?	Fill in the name and current addr	ess of that person.
		Name of your spouse, for	ormer spouse, or legal equiva	alent	_	
		Number Street			_	
		City	State	Zip Code	_	
	again as	a codebtor only if that	person is a guarantor or c	osigner. Make sure you have	ur spouse is filing with you. L e listed the creditor on <i>Schedu</i> le <i>D, Schedule E/F</i> , or <i>Schedul</i>	
	Column '	1: Your codebtor		Column 2: The creditor to	whom you owe the debt	
					Check all schedules that app	oly:
3.1	Carter, Pe	erry James			Schedule D, line	2.1;
_	Name				_	,
		PO Box 1231			Schedule E/F, line	
	Number	Street			Schedule G, line	

60121 Zip Code

Elgin City Illinois

State

Debtor 1 Linda Carter First Name Middle Name Last Name Debtor 2 Speuse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) MM/DD/YYYY Difficial Form 106 Schedule I: Your Income Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) MM/DD/YYYY Difficial Form 106 Schedule I: Your Income 12/1 Let as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 11 Describe Employment Debtor 1 Debtor 2 Include part time, seasonal, or separate page with information about additional employers. Employer's name Employer's name Citadel Care Center-Eigin LLC Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Morton Illinois 60063 City State Zip Code City City City City City City City City	Debtor 1 Linds Carter Fits Name Middle Name Last Name Debtor 2 Scouse, if Himp Fits Name Middle Name Last Name United States Bankruptcy Court for the: Northerm District of Illinois Care number Price of the Care of Illinois Care number Price of Illinois Care number District of Illinois Care number Illinois Care number District of Illinois Care number District of Illinois Care number District of Illinois Care number Information about your spouse. If you are separated and your spouse is not if Illing with you, do not include number of Illinois of Illinois Care number (if known). Answer every question. Part 1: Describe Employment District of Illinois Care number (if known). Answer every question. Part 1: Describe Employment District of Illinois Care number (if known). Answer every question. Employers name District of Illinois Care number (illinois of Illinois of Illino	Fill in th	is information to identify	your case:			4/16 14	:10:53	Desc Ma	ain	
Pirst Name	First Name Middle Name Last Name Last Name Check if this is: Check if this is: Check if this is: An amended filing An amended fi					ge oz or	00				
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Middle Name Last Name United States Bankruptcy Court for the: Northerm District of Illinois (State) Defficial Form 106 Schedule I: Your Income 12/1 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally seponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, not ude information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If now espace is needed, attach a separate sheet to this form. On the top of any additional larges, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Employer's address Employer's address Find Demptor Debtor 1 Debtor 2 Employed Not Emp	District of Illinois (State) United States Bankruptcy Court for the: Nothern District of Illinois (State) Official Form 106 Schedule I: Your Income Last Name Last Name District of Illinois (State) Official Form 106 Schedule I: Your Income Last Name Last Name District of Illinois (State) Official Form 106 Schedule I: Your Income Last Name Last Name District of Illinois (State) Official Form 106 Schedule I: Your Income Last Name Last Name District of Illinois (State) Official Form 106 Schedule I: Your Income Last Name Last Name District of Illinois (State) Official Form 106 Schedule I: Your Income Last Name Last Name District of Illinois (State) MM / DD / YYYYY An amended filing A supplement showing post-petition chapter experies as of the following date: MM / DD / YYYYY An amended filing A supplement showing post-petition chapter experies as of the following date: MM / DD / YYYYY An amended filing A supplement showing post-petition chapter experies as of the following date: MM / DD / YYYYY An amended filing A supplement showing post-petition chapter experies as of the following date: MM / DD / YYYYY An amended filing A supplement showing post-petition chapter experies as of the following date: MM / DD / YYYYY An amended filing A supplement showing post-petition chapter experies as of the following date: MM / DD / YYYYY An amended filing An amended fi	Deptor 1		Middle Name			-				
Case number Middle Name Last Name Name	Middle Name Last Name La	Debtor 2	riiotriamo	Wildie Harrie	Lastranio			Check if thi	s is:		
Case number (If known) District of Illinois (State) District of Illinois (State) District of Illinois (State) District of Illinois (State) Pofficial Form 106l Schedule I: Your Income 1271 Describe as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, not include information about your spouse. If you are separated and your spouse is not filling with you, do not include not make an under (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's address Employer's address Soft Demoster Number Street Number Street How long employed there? Morton Illinois 60053 City State Zip Code Popping date: expenses as of the following date: MMM/DD/YYYYY expenses as of the following date: MMM/DD/YYYYY expenses as of the following date: MMM/DD/YYYYY expenses as of the following date: MMM/DD/YYYYY expenses as of the following date: MMM/DD/YYYYY Expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expenses as of the following and the separate equally expen	Unificial Form 106l Schedule I: Your Income is as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, notude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional arges, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate pady your padditional and the properties of the propertie		f filing) First Name	Middle Name	Last Name		-	An ame	ended filing		
Case number (If known) Difficial Form 106l Schedule I: Your Income 12/1 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, naclude information about your spouse. If you are separated and your spouse is not filling with you, do not include normation about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (If known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. By you have more than one job, attach a separate page with information about additional employers. Employment status Debtor 1 Debtor 2 Employed Not	Case number (If thrown) Comparison and the Northing State	I Initad Cta	otoo Donkrijotov Coviet for the	Northorn	District of Illinois			A suppl	ement showing	post-pe	etition chapter 1
Case number (If Known) Difficial Form 106 Schedule I: Your Income 127 See as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, noclude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employment status Debtor 1 Debtor 2 Employed Not Employed Occupation Office work Employer's name Citadel Care Center- Elgin LLC Employer's name Employer's address Find the properties of the properties o	Official Form 106I Schedule I: Your Income ta so complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally asponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, reclude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Monton Illinois 60053 Grove State Zip Code Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space, include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse unless you are separated. 1. List monthly gross wages, salary, and commissions (before all payroll 2. \$1,233.74 1. List monthly gross wages, salary, and commissions (before all payroll 2. \$1,233.74 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$1,233.74 3. ±80.00	United Sta	ates Bankruptcy Court for the:	Northern			-	expens	es as of the follo	owing da	ate:
Difficial Form 106 Schedule I: Your Income Ize as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, not loude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employment status Debtor 1 Debtor 2 Employed Mot Employed Occupation Office work Employer's name Citadel Care Center- Elgin LLC Employer's name Employer's address Find Dempster Number Street Morton Illinois 60053 Grove City State Zip Code How long employed there?	Difficial Form 106 Schedule I: Your Income It is as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally seponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, clude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional arges, write your name and case number (If known). Answer every question. Part 1: Describe Employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write 50 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write 50 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payrol 2	Case num	nber		(Glaio)						
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, noclude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional larges, write your name and case number (if known). Answer every question. Fill in your employment information. Full in your employment information about additional employers. Employment status Debtor 1 Debtor 2 Employed Debtor 2 Employed Debtor 2 Employed Debtor 2 Debtor 3 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 7 Debtor 8 Debtor 9 Debto	Let as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, rolude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 Debtor 2 Employer's name Employer's name Employer's name Employer's address Monton Employer Number Stewat Number St	(If known)						MM / D	D/YYYY		
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, notude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional arges, write your name and case number (if known). Answer every question. Part 1: Describe Employment If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's address Employer's address Citadel Care Center- Elgin LLC Morton Illinois 60053 Grove City State Zip Code Morton Zip Code City State Zip Code	is as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally sponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, clude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Morton Illinois 60053 City State Zip Code Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 For Debtor 2 For Debtor 2 For Debtor 2 For Debtor 3 For Debtor 3 For Debtor 4 For Debtor 4 For Debtor 4 For Debtor 4 For Debtor 5 For Debtor 7 For Debtor 9 For Debtor 9	Officia	al Form 106I								
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Employment status Employed Employed Employed Not Employe	If you have more than one job, attach a separate page with information about additional employers. Citadel Care Center- Elgin LLC Employed City State Zip Code C	1.	Fill in your employment		Debtor 1			Debtor 2	2		
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Debtor 1 Linda Case 16-08685 Filed 03/44/16 Entered @3/14/16 14:10:53 Desc Main Doc 1 Middle Name Documentame Page 33 of 65 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$1,233.74 5. List all payroll deductions: \$258.94 5a. Tax, Medicare, and Social Security deductions 5a. 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$258.94 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$974.81 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$754.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$754.00 10.Calculate monthly income. Add line 7 + line 9. \$1,728.81 \$1,728.81 10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$1,728.81 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

Fill in this infe	Case 16-0868		3/14/16 Entered 03/	14/16 14:10:53	Desc Ma	in
FIII IN THIS INTO	ormation to identify your ca	se:	J			
Debtor 1	Linda		Carter			
	First Name	Middle Name	Last Name			
Debtor 2	ling) First Name	Middle News	L ant Name	Check if this is:		
(Opouse, ii iii	mig) First Name	Middle Name	Last Name	An amended filing	Í	
United States	s Bankruptcy Court for the:	Northern	District of Illinois	A supplement sho	•	•
Case numbe	ır		(State)	expenses as of the	e following date	:
(If known)				MM / DD / YYYY		
<u>Official</u>	l Form 106J					
Schedi	ule J: Your Ex	rnenses				12/15
		•				1210
nformation.			e filing together, both are equally form. On the top of any additiona			nber
	escribe Your Househ	old				
1. Is this a jo		ioiu				
_ `						
✓ No. (Go to line 2					
Yes.	Does Debtor 2 live in a s	eparate household?				
	No					
		o Official Forms 106 L2 Evenon	oog for Congrete Household of Dobt	or 2		
			ses for Separate Household of Debto)I Z.		
•	. =	No				
Do not list Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does deper with you?	ndent live
•	expenses include	NI-				
expenses than	s of people other	No				
yourself a	and your	Yes				
depende	•					
Part 2: Es	timate Your Ongoing	Monthly Expenses				
Estimate yo	our expenses as of your b s of a date after the bank	pankruptcy filing date unless y	ou are using this form as a supp plemental Schedule J, check the			e
		cash government assistance				
such assist	ance and have included	it on Schedule I: Your Income	(Official Form B 106l.)		Y	our expenses
	al or home ownership ex for the ground or lot. 4.	penses for your residence. Ind	clude first mortgage payments and		4.	\$0.00
If not in	cluded in line 4:					
4a. Real	l estate taxes				4a	\$0.00
4b. Prop	perty, homeowner's, or rente	er's insurance			4b.	\$0.00
4c. Hom	ne maintenance, repair, and	upkeep expenses			4c.	\$200.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Linda Case 16-08685 Doc 1 Filed 03/21/4/16 Entered 03/21/4/16 / 1844/10:53 Desc Main

Document Page 35 of 65 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$200.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$296.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies 7. \$315.00 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$100.00 9. 10. Personal care products and services \$100.00 10. 11. Medical and dental expenses \$100.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$140.00 15b 15c. Vehicle insurance \$0.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: Storage Unit \$75.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1	Linda Case 16-08685		Filed 03/1/4/16	Entered 03/14/16/1	<mark>₄4</mark> ։։ <u>1</u> 0: <u>53 Desc Ma</u>	ain
	First Name	Middle Name	Documetnit ^{me}	Page 36 of 65		
21. Other.	Specify:				21	\$0.00
22. Calcu	late your monthly expenses.					\$1,726.00
22a. A	dd lines 4 through 21.					\$0.00
22b. C	copy line 22 (monthly expenses f	or Debtor 2), if a	ny, from Official Form 106J	-2		\$1,726.00
22c. A	dd line 22a and 22b. The result is	s your monthly e	expenses.		22.	
23. Calcul	late your monthly net income				-	
23a. C	copy line 12 (your combined mon	thly income) fror	m Schedule I.		23a	\$1,728.81
23b. C	copy your monthly expenses from	line 22 above.			23b	\$1,726.00
	23c. Subtract your monthly expenses from your monthly income.					
٦	The result is your monthly net inc	come.			23c	-
24. Do yo	ou expect an increase or decre	ease in your ex	penses within the year af	ter you file this form?		
For o	xample, do you expect to finish p	oving for vour o	or loop within the year or do	vou ovnoct vour		
	gage payment to increase or dec	, , ,				
√ N	No.			, 00		
Ш	'es					
	Explain here:					

		Case 16-0868	5 Doc 1 Filed (02/1 <i>4</i> /16 Ent	tered 03/14/16 14:10:53	Desc Main
FIII	in this inforn	nation to identify your cas		7.37 127 10	<u></u>	Desc Main
De	btor 1	Linda		Carter		
	btor 2	First Name	Middle Name	Last Name		
(Sp	oouse, ir tiling	First Name	Middle Name	Last Name		
Un	ited States B	ankruptcy Court for the:	Northern	District of Illinois		
Ca	se number			(State)		
(If k	known)					
Of	fficial I	Form 106De	e <u>C</u>			Check if this is an amended filing
De	eclarat	ion About a	n Individual De	ebtor's Sch	edules	12/1
lf tw	o married p	people are filing together	er, both are equally respons	sible for supplying co	orrect information.	
prop 1519		ud in connection with a				aling property, or obtaining money or ears, or both. 18 U.S.C. §§ 152, 1341,
	_	ay or agree to pay some	eone who is NOT an attorne	y to help you fill out	bankruptcy forms?	
	✓ No					
	Yes. I	Name of person			ruptcy Petition Preparer's Notice, Decl fficial Form 119).	aration, and
	•	nalty of perjury, I declar are true and correct.	e that I have read the summ	nary and schedules fi	led with this declaration and	
×	/s/ Linda	Carter		×		
	Signature of	of Debtor 1		Si	gnature of Debtor 2	
	Date 3/14/	/2016 /DD/YYYY		Da	ate	

	in this info	Case 16-		Doc 1	Filed	03/14/16	Entered 0:	<mark>3/1</mark> 4/16 14:	10:53	Desc Ma	ain
	otor 1	rmation to identify y Linda	our case.			Cartei	r				
		First Name		Middle	Name	Last N		-			
	otor 2 ouse, if fili	ng) First Name		Middle	Name	Last N	lame	-			
Unit	ted States	Bankruptcy Court f	or the: N	orthern		District of III		-			
	se number					(8	State)	-			
		Form 10									Check if this is a amended filing
		ent of Fin	_	Δffairs	for	Individu	als Filino	for Ban	krunta	CV	12/1
Be a	s comple e is need	te and accurate a	s possible. rate sheet to	If two married this form. O	l people n the top	are filing togeth of any addition	ner, both are equa al pages, write yo	Illy responsible	for supplyi	ng correct inf	ormation. If more nswer every questior
1.	What	is your current ma	arital status	?							
		larried ot married									
2.	During	g the last 3 years, I	nave you liv	ed anywhere	other th	an where you liv	e now?				
		o es. List all of the place ebtor 1:	ces you lived	in the last 3 ye		not include where				Doto	es Debtor 2 lived
	D (in the second se			there		Debioi 2.			ther	
							Same as	Debtor 1			Same as Debtor 1
		S State Street Apt umber Street	#5C		- From	3/6/2008	Number Str	e et		Fron	າ
		uniber Street			_ To	9/9/2015				То	
	_	0	inois	60120	_		-				
	Ci	ty S	tate	Zip Code			City Same as	State Debtor 1	Zip Co		Same as Debtor 1
	Nu	umber Street			- From		Number Str	eet		Fron	າ
	_				_ To					To	
	Ci	ty S	tate	Zip Code	_		City	State	Zip Co	ode	
	territories No	ne last 8 years, dic s include Arizona, C Make sure you fill d	alifornia, Ida	ho, Louisiana,	Nevada,	New Mexico, Pue	erto Rico, Texas, V		• .	Community pro	operty states and

Debtor 1 Linda Case 16-08685 First Name Filed 03/14/16 Entered 03/14/16 (14/10:53 Desc Main Doc 1

art 2:	Explain the Sources of Your Inc	ome	Page 39 01 05		
. Did Fill i	I you have any income from employment in the total amount of income you received f vities. If you are filing a joint case and you ha No Yes. Fill in the details.	t or from operating a busines rom all jobs and all businesses,	including part-time		
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until he date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips Operating a business	\$2308.66	Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: January 1 to December 31,	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$14198.00	Wages, commissions, bonuses, tips Operating a business	
	For the calendar year before that: January 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	\$17843.00	Wages, commissions, bonuses, tips Operating a business	
Inclu bene and y	you receive any other income during this use income regardless of whether that income effit payments; pensions; rental income; interviyou have income that you received together, each source and the gross income from each No Yes. Fill in the details.	e is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child s from lawsuits; royalties; and	gambling and lottery winnings.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Social Security Benefits	\$2,262.00		
	For last calendar year: (January 1 to December 31,	Social Security Benefits	\$9,048.00		
	For the calendar year before that: (January 1 to December 31,	Social Security Benefits	\$9,384.00		

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rst Name Document Page 40 of 65

List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other

Linda Case 16-08685 Doc 1 Filed 03614/16 Entered 03/14/16 14410:53 Desc Main Debtor 1 Document Page 41 of 65 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Linda Case 16-08685
First Name Filed 03/14/16 Entered 03/14/16 (144)10:53 Desc Main Documenter Page 42 of 65 Doc 1

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9.		such matters, includ			party in any lawsuit, ims actions, divorces,				tody mo	difications, and contract
		lo 'es. Fill in the details.								
				Nature	of the case	Court or a	gency		Statu	s of the case
			Manorcare Health vices	workers	comp	Kane Count Court Name	ty Circuit Court			ending On appeal
		Case number	035930			Number Str		7: 0 1	. Пс	Concluded
		Case title				City	State	Zip Code	Р	Pending
		Case number				Court Name				On appeal Concluded
						City	State	Zip Code		
	☐ ✓	ck all that apply and f No. Go to line 11. Yes. Fill in the inform		w.	Describe the prope	erty		Date		Value of the property
		iSpeedy Loan			garnishment of wage	es		2/24/2016	6	\$730
		Creditor's Name 2850 Belvidere Rd Number Street			Explain what happe	ened				
		Waukegan City	Illinois State	60085 Zip Code	Property was rep Property was for Property was ga Property was att	reclosed. Irnished.	or levied.			
					Describe the prope	erty		Date		Value of the property
		Creditor's Name								
		Number Street			Explain what happe	ened				
					Property was rep Property was for Property was ga	reclosed. Irnished.				
		City	State	Zip Code	Property was att	ached, seized, c	or levied.			

Deb	tor 1		<u>d 03¢4r4/16 Entered </u> @3/4r4/16 <i>/</i> 1.44/40: cumeint Page 43 of 65	53 Desc	Main
11.		nin 90 days before you filed for bankruptcy, did any counts or refuse to make a payment because you owe	creditor, including a bank or financial institution, set of	f any amounts fr	om your
	Ħ	Yes. Fill in the details.			
	_		Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name			
		Number Street			
		-	Last 4 digits of account number: XXXX-		
		City State Zip Code			
12.		in 1 year before you filed for bankruptcy, was any of iver, a custodian, or another official?	your property in the possession of an assignee for the	e benefit of credi	tors, a court-appointed
		No Yes			
Part	5:	ist Certain Gifts and Contributions			
13.	Wit	hin 2 years before you filed for bankruptcy, did you	give any gifts with a total value of more than \$600 per	person?	
	✓	No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code Person's relationship to you			
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code			
		Person's relationship to you			

		FIRST Name	Milddle Name D	ocument Page 44 of 65		
14.	With	nin 2 years before you fi		give any gifts or contributions with a total value of mor	e than \$600 to an	y charity?
	✓	No Yes. Fill in the details for o	each gift or contribution.			
	_	Gifts with a total value per person	-	Describe the gifts	Dates you gave the gifts	Value
		Charity's Name		-		
		Number Street		_		
Dow	c.	City Sta List Certain Losses	·			
Part 15.	With			ou filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or
	$\overline{\mathbf{A}}$	No Yes. Fill in the details.				
		Describe the property y how the loss occurred	you lost and	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
				insurance claims on line 33 of Schedule A/B: Property.		
Part	_	List Certain Paymen			l	·
16.	seek Includ	ing bankruptcy or prepa	aring a bankruptcy petition	r anyone else acting on your behalf pay or transfer any p? it counseling agencies for services required in your bankrupto		le you consulted about
				Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Semrad Law Firm Person Who Was Paid 20 South Clark Street 28t Number Street	th Floor	Semrad Law Firm - \$0.00	3/14/2016	\$0.00
			nois 60606	-		
		City Sta Email or website address				
		None Person Who Made the Pa		-		
		Person Who Was Paid		-		
		Number Street				
		City Sta	ate Zip Code			
		Email or website address	3			
		Person Who Made the Pa	ayment, if Not You			

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<u> </u>			erty transferred	Date payment or transfer	Amour	nt of paymer
_				was made		
Р	Person Who Was Paid	-				
N	Number Street	-				
C	City State Zip Code	-				
clude ansfer	ary course of your business or financial affairs? be both outright transfers and transfers made as securing that you have already listed on this statement. Output Des. Fill in the details.	ty (such as the granting of a security inte	rest or mortgage on	your property). Do	not inclu	ıde gifts and
		Description and value of any property transferred		property or paymets paid in exchange		Date trans was made
P	Person Who Received Transfer	-				
N	Number Street	-				
	City State Zip Code Person's relationship to you	-				
P	Person Who Received Transfer	-				
N	Number Street					
	City State Zip Code Person's relationship to you	-				
hese No		ı transfer any property to a self-settled	d trust or similar de	evice of which yo	u are a b	eneficiary?
_ Ye	es. Fill in the details.	Description and value of the prop	erty transferred			Date trans

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Debtor 1 Linda Case 16-08685 First Name
 Doc 1
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 Middle Name
 Documentum
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Part 8: List Certain Financial Accounts	Instruments Safe Den	osit Boxes, and Storage II	nits

	or tr	ansferred?	igs, money ma	ırket, or other fina	ncial account			in your name, or for you anks, credit unions, broken		
		No Yes. Fill in the det	ails.							
					Last numb	4 digits of account per	Type o instrur	of account or ment	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was	Paid		xxxx	; -		necking avings		
		Number Street					Bro	oney market okerage her		
		City	State	Zip Code						
		Person Who Was	Paid		XXXX	<u>-</u>		necking avings		
		Number Street					☐ Mo	oney market okerage		
		City	State	7.0.1			Oth	her		
		City								
21.	Dov	ou now have, or		Zip Code	efore you file	ed for bankruptcy, an	y safe depos	sit box or other deposito	ry for securities,	cash, or other
21.		vou now have, or ables? No Yes. Fill in the det	did you have	·	efore you file	d for bankruptcy, an	y safe depos	sit box or other deposito	ry for securities,	cash, or other
21.	valu	ables? No	did you have	·		ed for bankruptcy, an	y safe depos	bit box or other deposito		cash, or other Do you still have it?
21.	valu	ables? No	did you have ails.	·			y safe depos			Do you still have it?
21.	valu	ables? No Yes. Fill in the det	did you have ails.	·	Who else		y safe depos			Do you still have it?
21.	valu	No Yes. Fill in the det Name of Financia Number Street	did you have ails.	within 1 year be	Who else	had access to it?	y safe depos			Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City	did you have ails. al Institution	within 1 year be	Who else Name Number City	Street State	Zip Code		S	Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City e you stored prop	did you have ails. al Institution State perty in a stor	within 1 year be	Who else Name Number City	Street State	Zip Code	Describe the contents	S	Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City e you stored prop	did you have ails. al Institution State perty in a stor	within 1 year be	Who else Name Number City e other than	Street State	Zip Code	Describe the contents	?	Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City e you stored prop No Yes. Fill in the det Titan Self Storage	did you have ails. al Institution State perty in a stor ails.	within 1 year be	Who else Name Number City e other than Who else	Street State your home within 1	Zip Code	Describe the contents you filed for bankruptcy Describe the contents shoes, clothes, some for	?	Do you still have it? No Yes Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City e you stored prop No Yes. Fill in the det Titan Self Storage Name of Storage	did you have ails. al Institution State perty in a stor ails.	within 1 year be	Who else Name Number City e other than Who else Perry Car Name	Street State your home within 1	Zip Code	Describe the contents you filed for bankruptcy Describe the contents	?	Do you still have it? No Yes Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City e you stored prop No Yes. Fill in the det Titan Self Storage	did you have ails. al Institution State perty in a stor ails.	within 1 year be	Who else Name Number City e other than Who else	Street State your home within 1	Zip Code year before y	Describe the contents you filed for bankruptcy Describe the contents shoes, clothes, some for	?	Do you still have it? No Yes Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City e you stored prop No Yes. Fill in the det Titan Self Storage Name of Storage 939 S McLean Bh	did you have ails. al Institution State perty in a stor ails.	within 1 year be	Who else Name Number City e other than Who else Perry Car Name PO Box 12 Number Elgin	Street State State your home within 1 had access to it? ter Street Illinois	Zip Code year before y	Describe the contents you filed for bankruptcy Describe the contents shoes, clothes, some for	?	Do you still have it? No Yes Do you still have it?
	valu	No Yes. Fill in the det Name of Financia Number Street City e you stored prop No Yes. Fill in the det Titan Self Storage Name of Storage 939 S McLean Bh	did you have ails. al Institution State perty in a stor ails.	within 1 year be	Who else Name Number City e other than Who else Perry Car Name PO Box 12 Number	Street State State your home within 1 had access to it? ter Street	Zip Code year before y	Describe the contents you filed for bankruptcy Describe the contents shoes, clothes, some for	?	Do you still have it? No Yes Do you still have it?

Deb		First Name Middle Name	Docume	^e nt™ Pag	ntered @3/1 ge 47 of 65	4416 44410: <u>53 Desc Mai</u> l	<u>n</u>
Part	9:	Identify Property You Hold or Contro	I for Someo	ne Else			
23.	_	No Yes. Fill in the details.	e else owns? lı	nclude any pro	perty you borro	wed from, are storing for, or hold in tru	st for someone.
			Where is the	e property?		Describe the contents	Value
		Owner's Name	Number Stre	eet		-	
		Number Street				-	
			City	State	Zip Code	-	
		City State Zip Code	_				
Part	10:	Give Details About Environmental In	nformation				
For	the p	urpose of Part 10, the following definitions apply:					
	ha in	nvironmental law means any federal, state, or loca azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clean ite means any location, facility, or property as define	nto the air, land, nup of these sul	soil, surface wa bstances, waste	ater, groundwater, es, or material.	, or other medium,	
		used to own, operate, or utilize it, including dispo-				om, operate, or unined it	
		lazardous material means anything an environment xic substance, hazardous material, pollutant, conta			aste, hazardous s	substance,	
Ren		I notices, releases, and proceedings that you know	•		occurred		
		any governmental unit notified you that you r	-			violation of an environmental law?	
		No Yes. Fill in the details.					
	_		Governmen	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	al unit		-	
		Number Street	Number Stre	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	_				
0 F		•					
25.	_	e you notified any governmental unit of any re	elease of nazar	dous material	?		
		No Yes. Fill in the details.					
			Governmen	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	al unit		-	
		Number Street	Number Stre	eet		-	
		-	City	State	Zip Code	-	
		City State Zip Code	_				

Debto	r 1	Linda Case 16-08685 First Name			E <u>ntered</u> 03/1.4 age 48 of 65	116/14/10: <u>53 Des</u>	c Main
26. H	lav	e you been a party in any judic	ial or administrativ	e proceeding under an	y environmental law	? Include settlements and ord	ders.
[Z	No					
L	_	Yes. Fill in the details.		Court or agency		Nature of the case	Status of the
							case
		Case title		Court Name			Pending
				Number Street			On appeal
		Cooperation					Concluded
		Case number		City State	Zip Code		
Part 1	1:	Give Details About Your	Business or C	onnections to Any	Business		
27. V	Vitl	hin 4 years before you filed for	bankruptcy, did yo	ou own a business or ha	ve any of the follow	ng connections to any busing	ess?
		A sole proprietor or self-emp A member of a limited liabili		•	•	time	
		A partner in a partnership	ty company (LLC) o	i iiriiled iiabiiity partiiersiii	p (LLF)		
		An officer, director, or mana					
Г	7	An owner of at least 5% of the No. None of the above applies. G		ecuniles of a corporation			
		Yes. Check all that apply above a		elow for each business.			
				Describe the natur	e of the business	Employer Identifica include Social Secu	
		Business Name		_		EIN:	
		Number Street		Name of accounta	nt or bookkeeper	Dates business exis	ted
		City State	Zip Code			FromTo	
				Describe the natur	e of the business	Employer Identifica include Social Secu	tion number Do not rity number or ITIN.
		Business Name				EIN:	
		Number Street		Name of accounta	nt or bookkeeper	Dates business exis	ted
		City State	Zip Code			FromTo	
				Describe the natur	e of the business	Employer Identifica include Social Secu	
		Business Name				EIN:	
		Number Street				Dates business exis	ted
				Name of accounta	nt or bookkeeper		
		City State	Zip Code	-		FromTo	

Debtor	1 <u>Linda Case 16-08685</u> First Name		<u>d 03¢1/4/16 Entere</u> ocumente Page 49	<u>:d</u> @3a/a1r4a/n1a6a/n1a4a/n10: <u>53 </u>	Desc Main
	/ithin 2 years before you filed for beditors, or other parties.		_		lude all financial institutions,
∠	No Yes. Fill in the details below.				
	-		Date issued		
	Name		MM/DD/YYYY		
	Number Street		-		
	City State	Zip Code	-		
Part 12	Sign Below				
and	ave read the answers on this State d correct. I understand that makin nkruptcy case can result in fines u /s/ Linda Carter	g a false statement, o	concealing property, or obtai	ning money or property by fraud or both. 18 U.S.C. §§ 152, 1341, 15	in connection with a
	Signature of Debtor 1			Signature of Debtor 2	
	Date 3/14/2016			Date	
Dic	d you attach additional pages to Yo No Yes	our Statement of Fin	ancial Affairs for Individuals	Filing for Bankruptcy (Official Fo	orm 107)?
Dic	d you pay or agree to pay someone	who is not an attorr	ney to help you fill out bankru	uptcy forms?	
✓	No				
	Yes. Name of person			Attach the Bankruptcy Petition I	

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Fill in this informa	ation to identify your case			J	-7.10 14.10.00	Description 1
Debtor 1	Linda		Carter			
	First Name	Middle Name	Last Nan	ne		
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Nan	ne		
United States Ba	nkruptcy Court for the:	Northern	District of Illino	ois		
			(Sta	ite)		
Case number (If known)	-					
Official F	orm 108					Check if this is an amended filing
Stateme	nt of Intenti	on for Individ	uals Filin	g Under C	Chapter 7	12/15
f you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form. If two married people are filing together in a joint case, both are equally responsible for supplying correct information.						
	ust sign and date the		- 4-3 <i>J</i> . 00 politon	s. cappiying o		

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: STRYKER AUTO Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Cadillac, CTS | Value: \$3,202.00 Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

Debtor	Linda Case 16-08685	Doc 1	Filed 03/14/16	Entered 03/14/16 14 Page 51 of 65 known)	:10:53	Desc Main
	First Name List Your Unexpired Pers			ne knōwn)		
For any informa	unexpired personal property l	ease that you li	sted in Schedule G: Exe	cutory Contracts and Unexpired that are still in effect; the lease pe		
Des	scribe your unexpired personal	property leases	s		Will the lea	se be assumed?
Les	sor's name:				No Yes	
	scription of leased perty:				_	
Les	ssor's name:				No Yes	
	scription of leased perty:					
Les	ssor's name:				No Yes	
	scription of leased perty:					
Les	ssor's name:				No Yes	
	scription of leased perty:					
Les	ssor's name:				No Yes	
	scription of leased perty:					
Les	ssor's name:				☐ No ☐ Yes	
	scription of leased perty:					
Les	ssor's name:				☐ No ☐ Yes	
	scription of leased perty:					
Part 3:	Sign Below					
	er penalty of perjury, I declare t is subject to an unexpired leas		ated my intention about	any property of my estate that se	ecures a de	bt and any personal property
×	/s/ Linda Carter			*		
S	ignature of Debtor 1			Signature of Debtor 1		

Official Form 108

Date 3/14/2016

MM/DD/YYYY

Date

MM/DD/YYYY

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Linda Carter		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
1.	DISCLOSURE OF Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. year before the filing of the petition in bankruptcy, or		abovenamed debtor(s) and th	at compensation paid to me within one
	in connection with the bankruptcy case is as follow	•	red of to be refluered off belia	
	For legal services, I have agreed to accept			\$1,425.00
	Prior to the filing of this statement I have received			\$0.00
	Balance Due			\$1,425.00
2.	The source of the compensation paid to me was: Debtor	Other (specify)		
3.	The source of the compensation paid to me is: Debtor	Other (specify)		
4.	I have not agreed to share the above-disclose members and associates of my law firm.	d compensation with any other person unless	s they are	
		ompensation with a other person or persons v y of the agreement, together with a list of the r ached.		
5.	In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation	d to render legal service for all aspects of the , and rendering advice to the debtor in determ		n in bankruptcy;
	b. Preparation and filing of any petition, sch	edules, statements of affairs and plan which n	may be required;	
	c. Representation of the debtor at the meet	ng of creditors and confirmation hearing, and	any adjourned hearings there	eof;
6.	By agreement with the debtor(s), the above-disclo	sed fee does not include the following service	es:	
		CERTIFICATION		
	I certify that the foregoing is a complete statement of eedings.	any agreement or arrangement for payment	to me for representation of the	e debtor(s) in this bankruptcy
	3/14/2016	/s/	Yisroel Moskovits	
	Date	Siç	gnature of Attorney	
		Ş	Semrad Law Firm	
		1	Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$310	total fee
+	\$75	administrative fee
	\$235	filing fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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In re:	Carter, Linda	Case No.	
_	Debtor(s)		
		Chapter. Chapter	r7
	VERI	FICATION OF CREDITOR MATRIX	
	The above named Debtors hereby verif	y that the attached list of creditors is true and correct to the	best of their knowledge.
Date:	3/14/2016	/s/ Carter, Linda	
		Carter Linda	

Signature of Debtor

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STRYKER AUTO 211 E HIGGINS STE H Gilberts , IL 60136

STATE COLLECTION SERVI 2509 S STOUGHTON RD MADISON , WI 53716

STATE COLLECTION SERVI 2509 S STOUGHTON RD MADISON , WI 53716

CREDTRS COLL POB 63 151 N SCHUYLER AVE KANKAKEE , IL 60901

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL , FL 33313

COMMONWEALTH FINANCIAL 245 MAIN ST DICKSON CITY, PA 18519

CREDTRS COLL POB 63 151 N SCHUYLER AVE KANKAKEE , IL 60901

NCC BUSINESS SVCS INC 9428 BAYMEADOWS RD STE 2 JACKSONVILLE , FL 32256

CREDIT MANAGEMENT LP 4200 INTERNATIONAL PKWY CARROLLTON , TX 75007

STANISCCONTR 914 14TH ST POB 480 MODESTO , CA 95353

L J ROSS ASSOCIATES IN 4 UNIVERSAL WAY JACKSON , MI 49202

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256

iSpeedy Loan 2850 Belvidere Rd Waukegan , IL 60085

Corporate Collections Department 1901 Gateway Drive Suite 200 Irving , TX 75038

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also un derstand that The Semrad Law Firm, LLC may incur costs for such it ems as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 1425.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.

Adding additional bills \$30.00

Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the b ankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Debtor Initials

the second retainer. Further, if I do not wish for The Semrad La w Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Sem rad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I li kewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

Lunderstand that Lam to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. Lunderstand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: March 14, 2016

Attorney ______ Yisroel Y. Moskovits

- 600

6 months 2 month = \$1/93

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Debtor 1 Linda First Name		Carter Case number (# km				
	lestions for Reporting Purpose	es '				
Part 6: Answer These Qu 16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. □ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. □ No. Go to line 16c. □ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. True ? additionalDetails.OtherTypesOfDebt: ""					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid the funds will be availab for distribution to unsecured creditors?	paid that funds will be availa No. Yes. Ie	r 7. Go to line 18. Do you estimate that after any exempt property ble to distribute to unsecured creditors?				
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below		all de clare under populty of periur	by that the information provided is true			
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,1 or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help m fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
; ; ;	Signature of Debtor 1	Signatu	re of Debtor 2			
A ANNUAL **	Executed on					

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		Doc	ument Pag	e 62 of 65		
Fill in this inform	ation to identify your cas	e:				
Debtor 1	Linda		Carter			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)						
Official F	orm 106De	C				Check if this is an amended filing
		<u> </u>	htor's Sche	dules		12/15
You must file thi property by frau 1519, and 3571.	is form whenever you t d in connection with a	er, both are equally responsi file bankruptcy schedules or bankruptcy case can result		Making a false statem	ent, concealing property up to 20 years, or both.	, or obtaining money or 18 U.S.C. §§ 152, 1341,
Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No						
	lame of person		Attach Bankrup Signature (Offic	otcy Petition Preparer's N cial Form 119).	lotice, Declaration, and	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

MM/DD/YYYY

Date 3/14/2016

Desc Main Case 16-08685 Doc 1 Filed 03/14/16 Entered 03/14/16 14:10:53 Page 63 of 65 Document Linda Debtor 1 Middle Name Last Name First Name Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, 28. creditors, or other parties. Yes√Fill ir the details below. Date issued MM/DD/YYYY Name Number Street Zip Code State City Sign Below Part 12: I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. nda Carter Signature of Debtor 2 Signature of Debtor Date Date 3/14/2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? **✓** No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

page 12

Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

No

Yes. Name of person

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Debtor	Linda		Carter	Case number (ii		
	First Name	Middle Name	Last Name	known)		
art 2:	List Your Unexpire	ed Personal Property Lease	s			
			-dula C. Evanutoni C	ontracts and Unexpired L	eases (Official Form	106G), fill in the
-fa-ma	tion holow. Do not list r	mai estate leases. Unexpired lease	s are leases that are s	fill ill elleer, are lease be-	riod has not yet ended	I. You may assume an
inexpir	ed personal property le	ease if the trustee does not assum	e it. 11 U.S.C. § 300(p)	(2).		
					Will the lease be assu	med?
Des	cribe your unexpired p	ersonal property leases				så avi Lenn i millioni millioni millioni
	_				No No	
Les	sor's name:			00000000000000000000000000000000000000	Yes	
Doc	scription of leased					
	perty:					
~~ ~					□ No	
Les	sor's name:				Yes	

	scription of leased					
prop	perty:	AND STATE OF THE S	representation of the control of the	MANY COMMISSION OF THE PROPERTY OF THE PROPERT	confidence a subsection of the confidence of the	e and in the contract of grammer to a deal with deciding the constitution is a wealth of the area of the
				1	∐ No	
Les	sor's name:			20. 20 . 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	Yes	
Des	scription of leased					
	perty:					
vocare/masso				· · · · · · · · · · · · · · · · · · ·	□ No	
Les	sor's name:				Yes	
				A STATE OF THE STA		
	scription of leased					
proj	perty:					
	oor's name:				No □ Yes	
Les	sor's name:				L ies	
Des	scription of leased					
	perty:					
AND COMMON			00000000000000000000000000000000000000		No	
Les	sor's name:				Yes	
*27778787474		un des des son militares de la companya de militares de la companya del la companya de la companya del la companya de la compa	- Committee - Comm			
	scription of leased					
pro	perty:				T No.	onto an antique de la companya de l
ΙΔC	sor's name:				☐ No ☐ Yes	
		- yes addings of the proceedings and the second	The state of the s	Physics - 1994 (1994) (_	
Des	scription of leased					
pro	perty:					
	1					
art 3:	Sign Below				1.1.4 4	nessenal property
Und that	er penalty of perjury, I o is subject to an unexpi	declare that I have indicated my in ired lease.	tention about any prop	perty of my estate that se	cures a debt and any	personal property
) \	1. 1. 1 (b.	×			
% _	SLLinda Carter /	THE MENT AND MEDICAL PROPERTY.		nature of Debtor 1		
S	ignature of Debtor 1		Jigi			
С	Date 3/14/2016		Dat	e		
	MM/DD/YYYY			MINI/DD/TTTT		

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Carter, Linda	Case No	
	Debtor(s)	Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MAT	RIX
	The above named Debtors hereby verify that	the attached list of creditors is true a	nd correct to the best of their knowledge.
Date:	3/14/2016	s/ Capter, Linda Carter, Linda	Linda Carlo

Signature of Debtor